Application for Certification as an Eligible Energy Resource Under the Delaware Renewable Energy Portfolio Standard

1. Name of Facility
   Baykowski, Thomas Residence - T Baykowski

2. Facility Address
   315 Swedes Street
   Rehoboth, DE 19971

Is the facility located within the PJM control area? ☑ **Yes** ☐ **No**
If No, does the Facility have import capabilities? ☐ **Yes** ☐ **No**

3. Name of Owner
   Thomas Baykowski
   Mailing Address
   315 Swedes Street
   Rehoboth, DE 19971

Phone **302 249 8699** Fax _____

Email **lucky6544@verizon.net**

4. Name of Operator
   same as owner
   Mailing Address
   _____
   _____

Phone _____ Fax _____

Email _____

5. Name of Contact Person
Allyson Browne, SRECTrade, Inc.
Mailing Address
201 California Street, Suite 630
San Francisco, CA 94111

Phone 877-466-4606 Fax 732-453-0065

Email applications@srectrade.com

6. Name of REC/SREC Owner
same as owner
Mailing Address
_____
_____

Phone _____ Fax _____

Email _____

7. List all PJM-EIS GATS State Certification Numbers assigned to this facility:
_____
_____
_____

8. Operational Characteristics:

Fuel Types Used (check all that apply):

☐ Gas combustion from the anaerobic digestion of organic material

☐ Geothermal

☐ Ocean, wave or tidal actions, currents, or thermal differences

☐ Qualified Biomass[i]

☐ Qualified Fuel Cells[ii]

☐ Qualified Hydroelectric[iii]

☐ Qualified Methane Gas captured from a landfill gas recovery system[iv]

☑ Solar

☐ Wind

If co-firing, provide the formula on file with PJM Environmental Information Services, Inc. (PJM-EIS)____n/a_____

Rated Capacity (in megawatts)_____0.00448_____

If multiple fuel types are utilized, attach the formula for computing the proportion of output per fuel type by megawatts per hour generated.

Facility **Final Approved Interconnection Date**_____1/11/16_____

If co-firing with fossil fuels, co-fire start date____n/a_____

If co-firing with fossil fuels, attach the allocation formula on file with PJM.

9. Is the Applicant's facility customer-sited generation[v]?

☑ Yes ☐ No

Is the Applicant's facility a community owned generating facility[vi]?

☐ Yes ☑ No

Can the output from the customer-sited generation be appropriately metered?

☑ Yes ☐ No

I, Allyson Browne (print name) hereby certify under penalty of perjury that

1. I have made reasonable inquiry, and the information contained in this Application is true and correct to the best of my knowledge, information and belief.

2. I am authorized to submit and execute this Application and to bind myself and/or my company to the representations contained herein.

3. I /my company agree(s) to comply with and be subject to the jurisdiction of the Public Service Commission of the State of Delaware for any matters arising out of my submission of this Application or the granting of the Application.

4. In the event that any of the information contained in this Application changes pending the consideration of this Application or after the Application is granted, I/my company will amend the Application to provide the Commission with such changed information.

5. I acknowledge that if any of the representations made in this Application or in any amendment thereto are found to be untrue when made, I/the company may be subject to sanctions, including but not limited to monetary fines and/or the revocation of any Certificate granted as a result of the representations made in this Application.

Signature: Allyson Browne

Date: 03/02/2016

Required Documentation:

- If the facility is customer-sited generation, attach a copy of the utility's Final Approved Interconnection Agreement

- If the facility is a community-owned energy generating facility, attach a list of contact information (names, address, phone number, fax, and email) of all owners or customers who are sharing the output of the generator.

- One copy of U.S. Department of Energy, Energy Information Administration Form EIA-860, if rated capacity is >1.0 MW

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[i] "Qualified Biomass" means electricity generated from the combustion of biomass that has been cultivated in a sustainable manner as determined by Delaware Department of Natural Resources and Environmental Control (DNREC), and is not combusted to produce energy in a waste to energy facility or in an incinerator.

[ii] "Qualified Fuel Cells" means electricity generated by a fuel cell powered by Renewable Fuels, as that term is defined in Section 1.0 of the Rules and Procedures to Implement the Renewable Energy Portfolio Standard, Delaware Public Service Commission Regulation Docket No. 56.

[iii] "Qualified Hydroelectric" means electricity generated by a hydroelectric facility that has a maximum design capacity of 30 megawatts or less from all generating units combined that meet appropriate environmental standards as determined by DNREC.

[iv] "Qualified Methane Gas" means electricity generated by the combustion of methane gas captured from a landfill gas recovery system; provided, however, that:

1. Increased production of landfill gas from production facilities in operation prior to January 1, 2004 demonstrates a net reduction in total air emissions compared to flaring and leakage;
2. Increased utilization of landfill gas at electric generating facilities in operation prior to January 1, 2004 (i) is used to offset the consumption of coal, oil, or natural gas at those facilities, (ii) does not result in a reduction in the percentage of landfill gas in the facility's average annual fuel mix when calculated using fuel mix measurements for 12 out of any continuous 15 month period during which the electricity is generated, and (iii) causes no net increase in air emissions from the facility; and
3. Facilities installed on or after January 1, 2004 meet or exceed 2004 Federal and State air emission standards, or the Federal and State air emission standards in place on the day the facilities are first put into operation, whichever is higher.

[v] "Customer-sited Generation" means a generating unit that is interconnected on the end use customer's side of the retail electricity meter in such a manner that it displaces all or part of the metered consumption of the end-use customer.

[vi] "Community-owned Energy Generating Facility" means a renewable energy generating facility that has multiple owners or customers who share the output of the generator, which may be located either as a stand-alone facility or behind the meter of a participating owner or customer. The facility shall be interconnected to the distribution system and operated in parallel with an electric distribution company's transmission and distribution facilities.

delmarva power

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PART 1

DELAWARE LEVEL 1 INTERCONNECTION APPLICATION & AGREEMENT

With Terms and Conditions for Interconnection
(Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW)

(Application & Conditional Agreement – to be completed prior to installation)

INTERCONNECTION CUSTOMER CONTACT INFORMATION

Customer Name: Tom Baykowski

Mailing Address: 315 Swedes st

City: Rehoboth Beach State: DE Zip Code: 19971

Contact Person (If other than above): _____

Mailing Address (If other than above): _____

Telephone (Daytime): 302-249-8699 (Evening): _____

Facsimile Number: _____ E-Mail Address (Required): Lucky6544@verizon.net

Alternate Contact Information

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Daytime): _____ (Evening): _____

Facsimile Number: _____ E-Mail Address: _____

FACILITY INFORMATION

Facility Address: 315 Swedes St

City: Rehoboth Beach State: DE Zip Code: 19971

DPL Account # of Facility Site: 5500 6596 310

Energy Source: Photovoltaics ▼ Prime Mover: Photovoltaics ▼

Type of Application: Initial ☒ Addition/Upgrade ☐ [1]

DC Nameplate Rating: 4.48 (kW) 4480 (kVA), AC Inverter Rating 4 (kW), AC System Design Capacity: 4 (kW) 4000 (kVA)

[1] **Initial if first time generator request. Addition/Upgrade if this is an add-on to a previously approved system.**

Generator (or PV Panel) Manufacturer, Model #: SolarWorld 280w MONO All Black
(A copy of Generator Nameplate and Manufacturer's Specification Sheet May Also be Submitted)

Inverter Manufacturer: Enphase Energy Model # & Rating: M-250

Number of Inverters: 16

Ampere Rating: 16.66 $Amps_{AC}$, Number of Phases: ■ 1 ☐ 3, Voltage Rating: 240 V_{AC},

Nominal DC Voltage: 31 V_{DC}, Power Factor: 100 %, Frequency: 60 Hz,

DPL Accessible Disconnect or Lock Box: ☐ Yes ■ No, If Yes, Location: _____

One-line Diagram Attached (Required): ■ Yes ☐ No, Site Plan Attached (Required): ☐ Yes ☐ No

Do you plan to export power?[2] ■ Yes ☐ No, If Yes, Estimated Maximum: 2 kW_{AC}

Estimated Gross Annual Energy Production: 4917 kWh

Is the inverter IEEE/UL1741 lab certified? Yes ■ No ☐ (If yes, attach manufacturer's cut sheet showing listing and label information from the appropriate listing authority, e.g. UL 1741 listing. If no, facility is not eligible for Level 1 Application.)

Estimated Commissioning Date: 11/2/15

EQUIPMENT INSTALLATION CONTRACTOR Check if owner-installed ☐

Name: Alutech United Inc
Mailing Address: 117 Dixon St
City: Selbyville State: DE Zip Code: 19975
Telephone (Daytime): 800-233-1144 (Evening): 302-841-9059
Facsimile Number: 302-436-5100 E-Mail Address (Required): derek@ecshutters.com

ELECTRICAL CONTRACTOR

Name: Alutech United Inc
Mailing Address: 117 Dixon St
City: Selbyville State: DE Zip Code: 19975
Telephone (Daytime): 800-233-1144 (Evening): 302-841-9059
Facsimile Number: 302-436-5100 E-Mail Address: russell@alutech.com
License number: T1-0005686
Active License? Yes ■ No ☐

Is small generator facility eligible for Net Metering? Yes ■ No ☐

[2] **Yes, if your expected maximum output of the inverter (kW AC) is greater than the lowest load you anticipate at your facility during maximum PV output (kW). The difference would be the amount you may export.**

INSURANCE DISCLOSURE

The attached terms and conditions contain provisions related to liability and indemnification, and should be carefully considered by the interconnection customer. The interconnection customer is not required to obtain general liability insurance coverage as a precondition for interconnection approval; however, the interconnection customer is advised to consider obtaining appropriate insurance coverage to cover the interconnection customer's potential liability under this agreement.

CUSTOMER SIGNATURE

I hereby certify that: 1) I have read and understand the terms and conditions which are attached hereto by reference and are a part of this Agreement; 2) I hereby agree to comply with the attached terms and conditions; and 3) to the best of my knowledge, all of the information provided in this application request form is complete and true. I consent to permit the PSC and interconnecting utility to exchange information regarding the generating system to which this application applies.

Interconnection Customer Signature: Tom Baykowski Date: 9/2/15

Printed Name: Tom Baykowski Title: Homeowner

Conditional Agreement to Interconnect Small Generator Facility *(for EDC use only)*

Receipt of the application fee is acknowledged and, by its signature below, the EDC has determined the interconnection request is complete. Interconnection of the small generator facility is conditionally approved contingent upon the attached terms and conditions of this Agreement the return of the attached Certificate of Completion duly executed, verification of electrical inspection and successful witness test or EDC waiver thereof.

EDC Signature: _____ Date: _____

Printed Name: _____ Title: _____

Gmail by Google

Shelly Culver <shelly@greenstreetsolar.com>

FW: Interconnection Application - Approval to Install For: THOMAS BAYKOWSKI, DE, Level 1, 55006596310

1 message

Derek Dykes <derek@ecshutters.com> Mon, Nov 23, 2015 at 6:59 AM
To: Russell Pfaller <russell@alutech.com>, "Shelly (Green Street Solar)" <shelly@greenstreetsolar.com>

From: gpc-north@pepcoholdings.com [mailto:gpc-north@pepcoholdings.com]
Sent: Monday, November 23, 2015 6:01 AM
To: LUCKY6544@VERIZON.NET
Cc: DEREK@ECSHUTTERS.COM; GPCNEM@pepcoholdings.com
Subject: Interconnection Application - Approval to Install For: THOMAS BAYKOWSKI, DE, Level 1, 55006596310

green power connection™

We support renewable energy and partner with our customers to ensure safe and reliable interconnection of renewable energy into the electric grid.

Your request is documented as follows:

Customer Name:	**THOMAS BAYKOWSKI**
Street Address:	**315 SWEDES ST**
City, State:	**REHOBOTH BEACH, DE**
Account Number:	**55006596310**
Source:	**SPV**
Generation Size:	**4.0**
Add-On:	**NO**

Tariff: **NET METER**

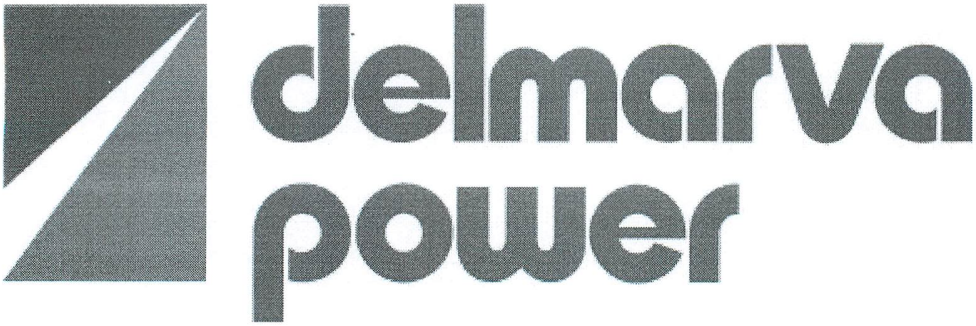
We have completed the technical screen of your interconnection request. Congratulations. The initial part of your interconnection application request is approved and you are now authorized to install your renewable generator system.

Next Steps: You may now build and install your system. After your system has been installed, complete your interconnection request by submitting the following.

- Part II of the Interconnection Application (*Certificate of Completion* ('COC')), and
- local electrical inspection certificate. NOTE: Copies or photos of the inspection stickers will not be accepted.

Friendly reminder: In accordance with State regulations, you are not permitted to turn on your generator system until you have received our written *Authorization to Operate*. Click HERE to learn more about the potential hazards.

Thank you for the opportunity to assist you with your interconnection request. If you have any questions or concerns, please call (866) 634-5571. **To ensure a response, please send all correspondence to gpc-north@pepcoholdings.com**



Energy for a changing world.™

Your Green Power Connection Team
A PHI Company
(866) 634-5571 - Phone
(856) 351-7523 - Fax
Mailing Address: 5 Collins Drive, Mail Stop 84CP22, Carneys Point, NJ 08069

www.delmarva.com/GPC

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PART 2

DELAWARE INTERCONNECTION APPLICATION & AGREEMENT

With Terms and Conditions for Interconnection
(Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW)

(Final Agreement – must be completed after installation and prior to interconnection)

Certificate of Completion

INTERCONNECTION CUSTOMER CONTACT INFORMATION

Name: Tom Baykowski
Mailing Address: 315 Swedes st
City: Rehoboth Beach State: DE Zip Code: 19971
Telephone (Daytime): 302-249-8699 (Evening): _____
Facsimile Number: _____ E-Mail Address: Lucky6544@verizon.net

FACILITY INFORMATION

Facility Address: 315 Swedes St
City: Rehoboth Beach State: DE Zip Code: 19971

DPL Account # of Facility Site: 5500 6596 310
Energy Source: Photovoltaics ▼ Prime Mover: Photovoltaics ▼
DC Nameplate Rating: 4.48 (kW) 4480 (kVA), AC Inverter Rating 4 (kW), AC System Design Capacity: 4 (kW) 4000 (kVA)

Inverter Manufacturer: Enphase Energy Model # & Rating: M-250
Number of Inverters: 16

EQUIPMENT INSTALLATION CONTRACTOR

Check if owner-installed ☐

Name: Alutech United Inc
Mailing Address: 117 Dixon St
City: Selbyville State: DE Zip Code: 19975
Telephone (Daytime): 800-233-1144 (Evening): 302-841-9059
Facsimile Number: 302-436-5100 E-Mail Address: derek@ecshutters.com

FINAL ELECTRIC INSPECTION AND INTERCONNECTION CUSTOMER SIGNATURE

The Small Generator Facility is complete and has been approved by the local electric inspector having jurisdiction. A signed copy of the electric inspector's form indicating final approval is attached. The Interconnection Customer acknowledges that it shall not operate the Small Generator Facility until receipt of the final acceptance and approval by the EDC as provided below.

Signed: _____: _____ Date _____
(Signature of interconnection customer)

Printed Name: Tom Baykowski

Type of Application: New/Initial ■ Growth/Increase ☐ System Capacity 4.48 KW (DC)

Check if copy of signed electric inspection form is attached ■

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ACCEPTANCE AND FINAL APPROVAL FOR INTERCONNECTION *(for EDC use only)*

The interconnection agreement is approved and the Small Generator Facility is approved for interconnected operation upon the signing and return of this Certificate of Completion by EDC:

Electric Distribution Company waives Witness Test? *(Initial)* Yes (DCD) No (_____)
If not waived, date of successful Witness Test: _____ Passed: *(Initial)* (_____)

EDC Signature: Diana C. DeAngelis Date: 2016.01.11 11:38:28 -05'00' Date: 1/11/16

Printed Name: Diana C. DeAngelis Title: Regulatory Affairs Lead

First State Inspection Agency, Inc.
1001 Mattlind Way
Milford, DE 19963

1-800-468-7338
302-422-3859

Alutech United, Inc.
James Rodrigue
PO Box 329
Selbyville, DE 19975

CERTIFICATE

Final Inspection Date:	12/11/2015
Application #:	018757
Owner:	Thomas Baykowski
Customer Job #:	
Occupancy:	Solar
Location:	315 Swedes Street, Rehoboth Beach, Sussex Co., DE

This certifies that the installation of electrical equipment listed on referenced application has been approved as meeting the requirements of the National Electric Code, utility, municipalities and Agency rules. Any modification, addition or alteration of the electrical system, after the date of final inspection, will require a new application for inspections and certifications.

Chief Electrical Inspector

F.S. CERT

10. If the Applicant's installation is solar or wind sited in Delaware, is a minimum of 50% of the cost of the renewable energy equipment, inclusive of mounting components, manufactured in Delaware?

☐ Yes* ■ No

Alutech United
Company Name of Installer

Signature of Company Representative

117 Dixon Str
Address

Shelly Culver
Print Name of Co. Representative

Selbyville DE 19975
Address

***If Yes, please attach the following documentation**:

- A copy of the supplier's invoice showing Delaware manufactured equipment with this facility identified
  - If the supplier's invoice shows only a coded Purchase Order (PO) number, a copy of the company's matching PO that includes the address where the materials were used/installed, must also be supplied
  - If using a master invoice, a record of the draws against the purchased quantity, on the master invoice, must show the address of each use and the quantity of material used

11. If the Applicant's installation is solar or wind sited in Delaware:

    a. Was the facility physically constructed or installed with a workforce that consists of at least 75% Delaware residents?
    ☐ Yes* ■ No

    b. Does the installing company employ, in total, a minimum of 75% workers who are Delaware residents?

    ☐ Yes* ■ No

Alutech United
Company Name of Installer

Signature of Company Representative

117 Dixon Str
Address

Shelly Culver
Print Name of Co. Representative

Selbyville DE 19975
Address

***If Yes, please attach supporting documentation (see pages 7-8 for details). Please note, in order to qualify for the Labor/Workforce Bonus, at least one of the options (a. or b.) must be met.**

Documentation Required for Delaware Labor/Workforce Bonus

11. If the Applicant's installation is solar or wind sited in Delaware:

    a. Was the facility physically constructed or installed with a workforce that consists of at least 75% Delaware residents?

If you answered yes to "a." above, complete the following as evidence.

The following individuals (list every employee) were employed by

Alutech United DBA Green Street Solar

Installation Company Name

as direct labor (physical construction and installation) for this facility: (Attach additional sheets if necessary)

Please complete the following information for all individuals listed above:

Name	Home Address (As per Tax Withholding)	Social Security Number (Last 4 digits only)
Na		

Total Delaware Resident Employees:_____ **Total Number of Employees:**_____

% of Delaware Residents (Delaware Residents Divided by Total Employees): _____

Documentation Required for Delaware Labor/Workforce Bonus

11. If the Applicant's installation is solar or wind sited in Delaware:

    b. Does the installing company employ, in total, a minimum of 75% of workers who are Delaware residents?

If you answered yes to "b." above, complete the following as evidence:

Hutech United DBA Green Street Solar

Installation Company Name

employed the following individuals (list EVERY employee on the payroll during the period from project start date until project completion date). Projects are considered complete upon final interconnection approval to operate. (Attach additional sheets if necessary)

Project Start Date: 12/11/2015 Project Complete Date: 1/11/2016

Employee Full Name	Home Address (As per Tax Withholding)	Social Security Number (Last 4 digits Only)
N/a		

Total Delaware Resident Employees:_____ **Total Number of Employees:**_____

% of Delaware Residents (Delaware Residents Divided by Total Employees): _____